

ROCKY KNOLL HEALTH CARE FACILITY

N7135 ROCKY KNOLL PARKWAY

PLYMOUTH 53073 Phone:(920) 893-6441

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 158

Total Licensed Bed Capacity (12/31/04): 158

Number of Residents on 12/31/04: 149

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 154

County

Skilled

No

Yes

Yes

154

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		26.2	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		53.7	
Supp. Home Care-Household Services	No	Developmental Disabilities	2.7	Under 65	24.8	More Than 4 Years		20.1	
Day Services	No	Mental Illness (Org./Psy)	28.2	65 - 74	12.8			-----	
Respite Care	No	Mental Illness (Other)	33.6	75 - 84	26.8			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	32.2	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.7	95 & Over	3.4	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	5.4	65 & Over	75.2	-----			
Transportation	No	Cerebrovascular	4.7		-----	RNs		10.0	
Referral Service	No	Diabetes	0.7	Gender	%	LPNs		7.2	
Other Services	Yes	Respiratory	2.7		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	21.5	Male	38.9	Aides, & Orderlies			
Mentally Ill	Yes	-----	-----	Female	61.1				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	7	6.4	145	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	4.7	
Skilled Care	7	100.0	321	93	84.5	125	0	0.0	0	28	87.5	168	0	0.0	0	0	0.0	0	128	85.9	
Intermediate	---	---	---	10	9.1	104	0	0.0	0	4	12.5	168	0	0.0	0	0	0.0	0	14	9.4	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	7	100.0		110	100.0		0	0.0		32	100.0		0	0.0		0	0.0		149	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	7.1	Bathing	14.8	53.7	31.5	149
Private Home/With Home Health	6.0	Dressing	30.2	44.3	25.5	149
Other Nursing Homes	10.7	Transferring	43.6	30.9	25.5	149
Acute Care Hospitals	67.9	Toilet Use	34.2	38.9	26.8	149
Psych. Hosp.-MR/DD Facilities	3.6	Eating	65.8	16.1	18.1	149
Rehabilitation Hospitals	0.0	*****				
Other Locations	4.8	Continence		%	Special Treatments	%
Total Number of Admissions	84	Indwelling Or External Catheter	2.0	Receiving Respiratory Care		9.4
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	58.4	Receiving Tracheostomy Care		0.7
Private Home/No Home Health	14.6	Occ/Freq. Incontinent of Bowel	41.6	Receiving Suctioning		0.0
Private Home/With Home Health	7.9			Receiving Ostomy Care		5.4
Other Nursing Homes	1.1	Mobility		Receiving Tube Feeding		4.7
Acute Care Hospitals	9.0	Physically Restrained	2.0	Receiving Mechanically Altered Diets		30.9
Psych. Hosp.-MR/DD Facilities	2.2			*****		
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	12.4	With Pressure Sores	4.7	Have Advance Directives		72.5
Deaths	52.8	With Rashes	0.0	Medications		
Total Number of Discharges				Receiving Psychoactive Drugs		75.2
(Including Deaths)	89					

 Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.5	93.1	1.05	90.2	1.08	90.5	1.08	88.8	1.10
Current Residents from In-County	91.3	86.2	1.06	82.9	1.10	82.4	1.11	77.4	1.18
Admissions from In-County, Still Residing	44.0	33.0	1.33	19.7	2.23	20.0	2.20	19.4	2.27
Admissions/Average Daily Census	54.5	79.1	0.69	169.5	0.32	156.2	0.35	146.5	0.37
Discharges/Average Daily Census	57.8	78.7	0.73	170.5	0.34	158.4	0.36	148.0	0.39
Discharges To Private Residence/Average Daily Census	13.0	29.9	0.43	77.4	0.17	72.4	0.18	66.9	0.19
Residents Receiving Skilled Care	90.6	89.7	1.01	95.4	0.95	94.7	0.96	89.9	1.01
Residents Aged 65 and Older	75.2	84.0	0.89	91.4	0.82	91.8	0.82	87.9	0.86
Title 19 (Medicaid) Funded Residents	73.8	73.3	1.01	62.5	1.18	62.7	1.18	66.1	1.12
Private Pay Funded Residents	21.5	18.3	1.18	21.7	0.99	23.3	0.92	20.6	1.04
Developmentally Disabled Residents	2.7	2.7	1.00	0.9	2.85	1.1	2.39	6.0	0.44
Mentally Ill Residents	61.7	53.0	1.16	36.8	1.68	37.3	1.66	33.6	1.84
General Medical Service Residents	21.5	18.6	1.15	19.6	1.10	20.4	1.05	21.1	1.02
Impaired ADL (Mean)	43.9	47.5	0.92	48.8	0.90	48.8	0.90	49.4	0.89
Psychological Problems	75.2	69.4	1.08	57.5	1.31	59.4	1.27	57.7	1.30
Nursing Care Required (Mean)	7.0	7.4	0.94	6.7	1.04	6.9	1.01	7.4	0.94